



N1(CHFL)

Claim Form

(CPR Part 7)

In the **High Court of Justice**
Chancery Division
Financial List
Royal Courts of Justice

	<i>for court use only</i>
Claim no.	
Issue date	

Claimant(s)

SEAL

Defendant(s)

Name and address of Defendant receiving this claim form

	£
Amount claimed	
Court fee	
Legal representative's costs	
Total amount	

The court office at the Chancery Registry, The Rolls Building, 7 Rolls Building, Fetter Lane, London, EC4A 1NL is open between 10am and 4.30pm Monday to Friday. Financial List cases issued in the Chancery Division are managed after issue by the Admiralty and Commercial Registry also in the Rolls Building. When corresponding with the court, please address forms or letters to the Court Manager and quote the claim number.

Claim no.	
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Brief details of claim

Particulars of claim (*attached)(*will follow if an acknowledgment of service is filed that indicates an intention to defend the claim)

Statement of Truth

*(I believe)(The Claimant believes) that the facts stated in this claim form *(and the particulars of the claim attached to this claim form) are true.

* I am duly authorised by the claimant to sign this statement

Full name _____

Name of *(claimant)(’s legal representative’s firm)_____

signed _____ position or office held _____

*(Claimant)(’s legal representative)

(if signing on behalf of firm, company or corporation)

**delete as appropriate*

Claimant’s or legal representative’s address to which documents or payments should be sent if different from overleaf including (if appropriate) details of DX, fax or e-mail.